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Nursing Management

COMMENT

COVID-19: psychological support for healthcare workers during and after the pandemic

Joanne Lusher

Graham Collins

David Chapman-Jones

Posted 12 May 2020 - 14:46



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Three experts in their field reflect on the psychological well-being of those healthcare workers carrying on their day-to-day work during the COVID-19 pandemic and beyond



Picture: iStock

Switching on the news is enough to demonstrate how COVID-19 has produced a devastating and perhaps permanent negative effect on the global economy, the lives of individuals and society as we know it. Throughout the pandemic, a key [message from the UK government has been that we must protect our NHS](#).

However, as well as protecting the sustainability of the NHS and the physical health of its workers, we must also ensure the psychological well-being of healthcare staff.

To illustrate, anecdotal reports point to pressures faced by UK NHS staff who are required to upskill, or reorientate as a response to sudden deployment. Some staff are likely to be undertaking tasks with which they are unfamiliar and for which they have only a basic skill set.

'It is estimated that up to one quarter of ambulance staff experience post-traumatic stress disorder and up to one third experience mental health issues as a result of COVID-19'

Our view is that it is also questionable how healthcare staff will behave when they return to normal practice when this pandemic is over, when the NHS turns its focus again to people with all the other conditions and diseases that didn't mystically disappear during the pandemic.

Furthermore, healthcare workers are also witnessing first-hand the frightening and agonising reality of death that patients undergo in isolation. They are under a tremendous pressure to care for these people with insufficient equipment and suboptimal protection ([Lintern 2020](#)).

Support must extend to non-medical personnel including healthcare workers

Lessons can be learned from early research published on the psychological effects of the pandemic on healthcare workers in Singapore ([Tan et al 2020](#)), which shows that support must

extend to non-medical personnel. This includes for example the healthcare workers who have volunteered to help in a variety of settings such as care homes.

Many of these healthcare staff have minimal training, work in privately owned care homes and have been left largely to fend for themselves. Recent Care Quality Commission (CQC) inspections reveal that more than 1,200 care homes have been classified as 'requiring improvement' or 'inadequate' on more than two consecutive occasions ([CQC 2017](#)). This suggests that staff working in these care homes had problems enough before the onset of this COVID-19 pandemic and now face an intolerable work environment that may have a significant psychological effect on them unless there is the infrastructure in place to care adequately for their mental health needs.

A final demonstration of why we must ensure the psychological well-being of all healthcare staff is that it is estimated that up to one quarter of ambulance staff experience post-traumatic stress disorder and up to one third experience mental health issues ([Walker and Gerada 2020](#)).

Managing stress associated with the COVID-19 outbreak

In terms of wider strategies already in place to support healthcare workers, [Samaritans UK has launched a dedicated phone line for NHS staff](#) designed to offer a non-judgemental listening service so that NHS workers can offload in a safe and confidential environment. Unveiled in April 2020, the NHS-funded scheme is operated by existing Samaritans volunteers, who themselves are in self-isolation and perhaps need their own psychosocial support.

Several recommendations for managing stress associated with the COVID-19 outbreak have been published, but these are generic and do not speak directly to healthcare workers. US guidance ([US Department of Veterans Affairs 2020](#)), for example, refers to increasing one's sense of safety (regular handwashing), staying calm (recognising anxiety) and connected (talk to family), and remaining hopeful (gratitude).

'The level of support that could be required in years to come for individuals, particularly those who have worked in healthcare during this pandemic, must not be underestimated, or overlooked'

However, these suggestions are unlikely to lead to a change in mindset because they lack any support in the form of practical tools or exercises that might facilitate any such shift in psychological stance.

Further recommendations for support might be prompted by insights that have been informally shared by nurses reporting panic attacks (Murrell et al 2020).

The public's attitudes to healthcare workers are likely to have changed for the better

As a nation we have been proactive in tackling the palpable psychological stress put on to NHS staff during this pandemic, for example by calling in psychologically prepared and resilient members of the armed forces. Unquestionably a formalised policy to provide an adequate level of psychological support for all healthcare workers is needed to cater for an inevitable future demand.

In a more positive light, we conclude that it is likely that, following this pandemic, the public's attitude towards healthcare workers will have changed for the better, forever. However, this will not ease the psychological burden this coronavirus is likely to have had on healthcare workers.

There is often no obvious cause-effect timeline from trauma to response so the probable detrimental psychological impact of this outbreak on healthcare workers might be delayed. The level of support that could be required in years to come for individuals, particularly those who have worked in healthcare during this pandemic, must not be underestimated, or overlooked, as has

traditionally been the case for our 'highly trained and psychologically resilient' soldiers who have served in wars but never recovered mentally from that service.

View our COVID-19 resource centre



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Graham Collins is a listening volunteer with Samaritans



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Find out more

- ▶ Care Quality Commission (2017) CQC to rate more providers following inspection
- ▶ Lintern S (2020) Coronavirus: Doctors and nurses will need PTSD treatment after COVID-19 virus peaks in hospitals, warn health leaders
- ▶ Murrell A, Lusher J, Mafuva C et al (2020) COVID-19 Pandemic and the Surge of Panic Attacks among NHS Nursing Staff: An Ethnographical Perspective. Unpublished report, under review.
- ▶ US Department of Veterans Affairs (2020) Managing Stress Associated with the COVID-19 Virus Outbreak
- ▶ Tan BYQ, Chew NWS, Lee GKH et al (2020) Psychological impact of the COVID-19 pandemic on health care workers in Singapore
- ▶ Walker C, Gerada C (2020) Extraordinary times: coping psychologically through the impact of COVID-19

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